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Florida Department of State

Division of Corporations  
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## To:

Division of Corporations  
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## From:

Account Name : C T CORPORATION SYSTEM  
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## FOREIGN PROFIT/NONPROFIT CORPORATION

Virgin Money USA, Inc.

Certificate of Status	0
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Corporate Filing Menu

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<https://efile.sunbiz.org/scripts/efilcovr.exe>T. Burch OCT 25 2007  
10/24/2007

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.**

1. Virgin Money USA, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware

(State or country under the law of which it is incorporated)

3. 04-3516820

(FBI number, if applicable)

4. 06/21/2002

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 69 Hickory Drive, Waltham, MA 02451-1011

(Principal office address)

same

(Current mailing address)

8. SEE ATTACHMENT

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324

(City)

(Zip code)

10. Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

CT Corporation System

By: Conie Brey

(Registered agent's signature)

CONNIE BREY  
SPECIAL ASSISTANT SECRETARY

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

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**A. DIRECTORS SEE ATTACHMENT**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Asheesh Advani

Address: 69 Hickory Drive

Waltham, MA 02451

Director: Michael C. Brooks

Address: 30 Rockefeller Plaza, Room 5508

New York, NY 10112

**B. OFFICERS SEE ATTACHMENT**

President: Asheesh Advani

Address: 69 Hickory Drive

Waltham, MA 02451

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. Asheesh Advani, President

(Typed or printed name and capacity of person signing application)

**Attachment to Florida  
Purpose Clause**

The nature of the business or purposes to be conducted or promoted is to engage in any lawful act or activity for which corporations may be organized under the General Corporation Law.

**Officers & Directors**

- |   |                   |                              |
|---|-------------------|------------------------------|
| 1 | Full Name:        | Jim Robichau                 |
|   | Officer/Director: | Officer                      |
|   | Officer's Title:  | Secretary and Treasurer      |
|   | Director's Title: |                              |
|   | Business Address: | 69 Hickory Drive             |
|   | City:             | Waltham                      |
|   | State:            | MA                           |
|   | ZIP Code:         | 02451                        |
| 2 | Full Name:        | Frances E. Brandon-Farrow    |
|   | Officer/Director: | Director                     |
|   | Officer's Title:  |                              |
|   | Director's Title: | Other Director               |
|   | Business Address: | 65 Bleeker Street, 6th Floor |
|   | City:             | New York                     |
|   | State:            | NY                           |
|   | ZIP Code:         | 10012                        |
| 3 | Full Name:        | Anthony S. Marino            |
|   | Officer/Director: | Director                     |
|   | Officer's Title:  |                              |
|   | Director's Title: | Other Director               |
|   | Business Address: | 65 Bleeker Street, 6th Floor |
|   | City:             | New York                     |
|   | State:            | NY                           |
|   | ZIP Code:         | 10012                        |
| 4 | Full Name:        | Mark Poole                   |
|   | Officer/Director: | Director                     |
|   | Officer's Title:  |                              |
|   | Director's Title: | Other Director               |
|   | Business Address: | 3 Cours de Rive              |
|   | City:             | Geneva                       |

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# Delaware

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*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VIRGIN MONEY USA, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF OCTOBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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TALLAHASSEE, FLORIDA

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*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6093587

DATE: 10-22-07